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| Fill in this information to identify the case: | |
|--|--------------|
| United States Bankruptcy Court for the: | |
| Northern District of Illinois (State) | |
| Case number (If known): | _ Chapter11_ |
| | |

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

| 1. | Debtor's name | Innvanta | age Group, | Inc. | | | | |
|----|--|---------------------------|------------|----------|---------------------|------------------|----------------|----------------|
| | | | | | | | | |
| 2. | All other names debtor used in the last 8 years Include any assumed names, | | | | | | | |
| | trade names, and doing business as names | | | | | | | |
| | as names | | | | | | | |
| 3. | Debtor's federal Employer Identification Number (EIN) | 8 2 _ 2 0 5 6 | 3 6 | 9 | | | | |
| 4. | Debtor's address | Principal place of busine | | | Mailing a of busine | ddress, if diffe | rent from p | rincipal place |
| | | 1585 S. Shields D | r. | | | | | |
| | | Number Street | | | Number | Street | | |
| | | | | | | | | |
| | | | | | P.O. Box | | | |
| | | Waukegan, IL 600 | | | | | | |
| | | City | State | ZIP Code | City | | State | ZIP Code |
| | | | | | Location | of principal as | sets, if diffe | erent from |
| | | Lake | | | principal | place of busin | iess | |
| | | County | | | | | | |
| | | • | | | Number | Street | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | City | | State | ZIP Code |
| | | | | | | | | |
| 5. | Debtor's website (URL) | | | | | | | |

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| Debt | or Innvantage Group | , Inc. Case number (if known) |
|------|--|---|
| | Name | |
| 6. | Type of debtor | ☐ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) ☐ Partnership (excluding LLP) ☐ Other. Specify: |
| 7. | Describe debtor's business | A. Check one: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Railroad (as defined in 11 U.S.C. § 101(44)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) Clearing Bank (as defined in 11 U.S.C. § 781(3)) None of the above |
| | | B. Check all that apply: □ Tax-exempt entity (as described in 26 U.S.C. § 501) □ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) □ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11)) |
| | | NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes . 2 3 6 2 |
| 8. | Under which chapter of the Bankruptcy Code is the debtor filing? A debtor who is a "small business debtor" must check the first subbox. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box. | Chapter 7 Chapter 9 Chapter 11. Check all that apply: The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form. |
| | | 12b-2. Chapter 12 |
| | | |

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| Debto | Innvantage | Group, In | ıc. | | Case number (if k | known) | |
|-------|---|----------------|--|--|---|---|--|
| , | Were prior bankruptcy cases filed by or against the debtor within the last 8 years? If more than 2 cases, attach a separate list. | ĭ No ☐ Yes. | | Wher | | | |
| i | Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? List all cases. If more than 1, attach a separate list. | ĭ No ☐ Yes. | District | mber, if known | | When | |
| | Why is the case filed in <i>this</i> district? | imme distri | or has ha ediately p ct. | oly: and its domicile, principal place of the control of this petition of the control of the co | n or for a longe | r part of such 18 | 0 days than in any other |
| | Does the debtor own or have possession of any real property or personal property that needs immediate attention? | | Why doe It pos What It nee It inc atten asse Othe Where is | pelow for each property that need is the property need immediates or is alleged to pose a threat is the hazard? Peds to be physically secured or loudes perishable goods or assettion (for example, livestock, seats or other options). The property? Number City Operty insured? Insurance agency Contact name Phone | te attention? (t of imminent and protected from the sthat could quisonal goods, manufacture) Street | (Check all that app nd identifiable hat the weather. ickly deteriorate neat, dairy, produ | or lose value without uce, or securities-related |

Statistical and administrative informatio

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| Debtor Innvantage Name | | | Case number (ii known) | | | |
|--|--|---|---|--|--|--|
| 13. Debtor's estimation of available funds | | for distribution to unsecured creditors. e expenses are paid, no funds will be av | ailable for distribution to unsecured creditors. | | | |
| 14. Estimated number of creditors | △ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | |
| 15. Estimated assets | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| 16. Estimated liabilities | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | □ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion | | | |
| WARNING Bankruptcy fraud is a se | | atement in connection with a bankrupto 18 U.S.C. §§ 152, 1341, 1519, and 357 | | | | |
| 17. Declaration and signature of authorized representative of debtor | The debtor requests rel | ief in accordance with the chapter of title | e 11, United States Code, specified in this | | | |
| | I have been authorized | to file this petition on behalf of the debto | or. | | | |
| | I have examined the info | ormation in this petition and have a reas | sonable belief that the information is true and | | | |
| | I declare under penalty of pe | erjury that the foregoing is true and corr | ect. | | | |
| | 09/18/20: MM / DD / Y | YYYY - | Dena Theo | | | |
| | Signature of authorized repr | resentative of debtor Printed n | ame | | | |
| | Title President | | | | | |
| | | | | | | |

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| Debtor | Innvamntage Group, Inc. | Case number (if known) |
|------------------|--|-----------------------------------|
| 18. Signature of | attorney Signature of attorney for d | Date 09/18/2023 MM / DD / YYYY |
| | Timothy C. Culb | pertson |
| | Firm name | |
| | P.O. Box 56020 Number Street Harwood Heigh | |
| | City | State ZIP Code |
| | 847-913-5945 Contact phone | tcculb@gmail.com Email address |
| | 6229083 - IL | |
| | Bar number | State |

| Fill in this in | formation to identify th | e case: | |
|-----------------|---------------------------|-------------|------------------------|
| Debtor name | Innvantage | Group, Inc. | |
| United States | Bankruptcy Court for the: | Northern | District of IL (State) |
| Case number | (If known): | | |

☐ Check if this is an amended filing

12/15

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

| | Name of creditor and complete mailing address, including zip code | Name, telephone number, and email address of creditor contact | debts, bank loans, professional | Indicate if claim is contingent, unliquidated, or disputed | Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|---------------------------------|--|--|--|-----------------|
| | | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| 1 | Classic Distribution c/o Mark Grzymala 10024 Skokie Blvd., Suite 323 Skokie, IL 60077 | | trade debt | | | | \$215,452.80 |
| 2 | SBA PO Box 3918 Portland, OR 97208-3918 | | business loan | | | | \$2,000,000.00 |
| 3 | Millie & Severson 6602 Owens Dr., Ste. 50 Pleasanton, CA 94588 | | trade debt | disputed | | | \$500,000.00 |
| 4 | Premium West 4417 30th St. San Diego, CA 92116 | | trade debt | disputed | | | \$154,135.17 |
| 5 | Spooners 12460 Kirkham Ct. Poway, CA 92064 | | trade debt | disputed | | | \$ 81,730.16 |
| 6 | Levelset 1121 Josephine Street New Orleans, LA 70130 | | trade debt | | | | \$ 76,906.98 |
| 7 | MGM, LLC 770 Warwick Lane Lake Zurich, IL 60047 | | trade debt | disputed | | | \$110,000.00 |
| 8 | Zen Living Ltd #1. 421661st Ave. SE Calgarty, Alberta CAN T2C1Z5 | | trade debt | | | | \$ 60,967.59 |

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| Debtor | Innvantage Group, Inc. | Case number (if known) |
|--------|------------------------|------------------------|
| | Name | |

| Name of creditor and complete mailing address, including zip code | | email address of creditor (for example, tradebts, bank loa professional services, and government | (for example, trade debts, bank loans, professional services, and | example, trade ts, bank loans, essional ices, and ernment claim is contingent, unliquidated, or disputed | Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|--|--|--|--|---|-----------------|
| | | | Solitados, | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| 9 | Capital One Spark PO BOX 4069 Carol Stream, IL 60197-4069 | | credit card debt | | | | \$ 45,000.00 |
| 10 | The Hartford PO Box 660916 Dallas, TX 75266-0916 | | trade insurance | | | | \$ 41,662.78 |
| 11 | Ohio Security Ins. Co. 134 N. LaSalle St., Ste. 750 Chicago, IL 60602 | | lawsuit | disputed | | | \$ 26,796.32 |
| 12 | Paro-US 343 W. Erie St., Ste. 600 Chicago, IL 60654 | | trade debt | | | | \$ 25,000.00 |
| 13 | Blue Cross/Blue Shield PO Box 650615 Dallas, TX 75265-0615 | | Insurance | | | | \$ 21,745.64 |
| 14 | Professional Assoc. Survey 7100 N. Tripp Ave. Lincolnwood, IL 60712 | | trade debt | | | | \$ 17,000.00 |
| 15 | IDES 33 S. State St, 10th Floor Chicago, IL 60603-2802 | | tax claim | | | | \$ 14,642.24 |
| 16 | American Marble 1280 N. Melrose Dr. Vista, CA 92083 | | trade debt | | | | \$ 12,325.50 |
| 17 | Daly Fire Protection c/o Timothy Snyder 120 E Ogden Ave Ste 17B Hinsdale, Illinois 60521-3544 | | lawsuit | disputed | | | \$ 12,174.00 |
| 18 | Crown Equipment PO Box 641173 Cincinnati, OH 45264-1173 | | trade debt | | | | \$ 12,064.36 |
| 19 | State of CA-Chris Skaletsky 2 MacArthur Pl., Ste. 800 Santa Ana, CA 92707 | | labor dispute | disputed | | | \$ 9,936.08 |
| 20 | Flannery Fire 4810 52nd Ave. Kenosha, WI 53144 | | trade debt | | | | \$ 7,218.20 |

Innvantage Group Creditors

American Marble 1280 N. Melrose Dr. Vista, CA 92083

Assured Partners 977 Lakeview Pkwy., Ste. 105 Vernon Hills, IL 60061

Blue Cross/Blue Shield PO Box 650615 Dallas, TX 75265-0615

Business Relocation Services 20 Aquarium Dr. Secaucus, NJ 07094

Capital One Spark PO BOX 4069 Carol Stream, IL 60197-4069

Contech 3100 Tollview Dr. Rolling Meadows, IL 60008

Courtesy Moving & Storage 3515 N. Sabre Dr. Fresno, CA 93727

Crown Equipment PO Box 641173 Cincinnati, OH 45264-1173

Cox Communications PO Box 53214 Phoenix, AZ 85072-3214

First Insurance Funding PO Box 7000 Carol Stream, IL 60197-7000

Flannery Fire 4810 52nd Ave. Kenosha, WI 53144

FSS Technologies 516 West Campus Dr. Arlington Heights, IL 60004 IDES 33 S. State St, 10th Floor Chicago, IL 60603-2802

Infinite Design 1621 Bolton Rd. Richmond, VA 23225

ISPS Corp. of Cailf. PO BOX 100391 Pasadena, CA 91189-0391

Jacob Management PO BOX 230931 Encintas, CA 92023

Levelset 1121 Josephine Street New Orleans, LA 70130

Paro-US 343 W. Erie St., Ste. 600 Chicago, IL 60654

Professional Assoc. Survey 7100 N. Tripp Ave. Lincolnwood, IL 60712

Pure Logistics 337 Gateford Dr. Bailwin, MO 63021

SDGE PO BOX 25111 Santa Ana, CA 92799-5111

SBA PO BOX 3918 Portland, OR 97208-3918

Seldon Fox 619 Enterprise Dr. Oak Brook, IL 60523

State of CA Franchise Tax PO BOX 942857 Sacramento, CA 94257-0511 Sunbelt Rentals PO Box 409211 Atlanta, GA 30384-9211

The Hartford PO Box 660916 Dallas, TX 75266-0916

Waste Management PO Box 4648 Carol Stream, IL 60197-4648

Zen Living Ltd #1. 421661st Ave. SE Calgarty, Alberta CAN T2C1Z5

Classic Distribution c/o Mark Grzymala 10024 Skokie Blvd., Suite323 Skokie, IL 60077

Daly Fire Protection c/o Timothy Snyder 120 E Ogden Ave Ste 17B Hinsdale, Illinois 60521-3544

MGM, LLC 770 Warwick Lane Lake Zurich, IL 60047

Spooners 12460 Kirkham Ct. Poway, CA 92064

State of CA-Chris Skaletsky 2 MacArthur Pl., Ste. 800 Santa Ana, CA 92707

Ohio Security Ins. Co. 134 N. LaSalle St., Ste. 750 Chicago, IL 60602

Millie & Severson 6602 Owens Dr., Ste. 50 Pleasanton, CA 94588 Case 23-12352 Doc 1 Filed 09/18/23 Entered 09/18/23 14:48:36 Desc Main Document Page 9 of 38

Premium West 4417 30th St. San Diego, CA 92116

DTK Construction, Inc. c/o Bret Andrew Rappaport Hardt Stern & Kayne PC 2610 Lake Cook Rd., Suite 200 Riverwoods, Illinois 60015-5710

Equity Holders:

Dean Theo 611 V oltz Rd. Northbrook, IL 60062 50% Shareholder

James Stivers 770 Skokie Blvd., No. 451 Northbrook, IL 60062 50% Shareholder

IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re: | |) | |
|--------|-------------------------|---|------------|
| | |) | |
| | Innvantage Group, Inc., |) | No. |
| | |) | |
| | Debtor. |) | Chapter 11 |

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal rule of Bankruptcy Procedure 7007.1, and to enable the Judges to evaluate possible disqualification or recusal, the undersigned officer of Innvantage Group, Inc., the Debtor in the above captioned action, certifies hat the following are corporations, other than the debtor or a governmental unit, that directly or indirectly owns 10% or more of any class of the Debtor's equity interests, or states that there are entities to report pursuant to F.R.Bankr.P. 7007.1.

None.

Date: September 18, 2023

Dena Theo, President

INNVANTAGEBalance Sheet

As of September 18, 2023

| | | Total |
|---------------------------------|-----|--------------|
| ASSETS | | |
| Current Assets | | |
| Bank Accounts | | |
| Chase - Innvantage | | -426,989.92 |
| First Secure 4994 | | -11,468.78 |
| First Secure Bank (6673) | | -33,510.04 |
| Total Bank Accounts | -\$ | 471,968.74 |
| Accounts Receivable | | |
| Accounts Receivable | | 1,324,105.36 |
| Total Accounts Receivable | \$ | 1,324,105.36 |
| Other Current Assets | | |
| Uncategorized Asset | | 76,000.00 |
| Undeposited Funds | | 0.00 |
| Total Other Current Assets | \$ | 76,000.00 |
| Total Current Assets | \$ | 928,136.62 |
| Fixed Assets | | |
| Furniture and Equipment | | 250,000.00 |
| Total Fixed Assets | \$ | 250,000.00 |
| Other Assets | | |
| WGB B/S adjustments | | 0.00 |
| Total Other Assets | \$ | 0.00 |
| TOTAL ASSETS | \$ | 1,178,136.62 |
| LIABILITIES AND EQUITY | | |
| Liabilities | | |
| Current Liabilities | | |
| Accounts Payable | | |
| Accounts Payable | | 464,649.99 |
| Total Accounts Payable | \$ | 464,649.99 |
| Other Current Liabilities | | • |
| Billd | | 227,090.17 |
| Constrafor Loans | | 43,527.83 |
| Loans Payable | | 0.00 |
| CAN Capital | | 0.00 |
| Capital One Spark | | 42,000.00 |
| Jim - IDOR | | 0.00 |
| PL Credit Card | | 29,650.13 |
| PL Loan New | | 90,675.00 |
| Shareholder's Loan | | 445,207.22 |
| Total Loans Payable | \$ | 607,532.35 |
| Payroll Liabilities | Ψ | 0.00 |
| Total Other Current Liabilities | | 878,150.35 |
| Total Other Oursell Liabilities | Ψ | 070,100.00 |

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| Total Current Liabilities | \$ | 1,342,800.34 |
|------------------------------|-----|---------------|
| Long-Term Liabilities | | |
| Ioan-OOTB | | 0.00 |
| Ioan-SBA EIDL | | 1,999,900.00 |
| Outstanding IncomeTaxes Due | | 43,668.32 |
| Shareholders Loans | | 0.00 |
| Total Long-Term Liabilities | \$ | 2,043,568.32 |
| Total Liabilities | \$ | 3,386,368.66 |
| Equity | | |
| Opening Balance Equity | | -1,371,894.70 |
| Retained Earnings | | -1,243,672.69 |
| Net Income | | 1,606,682.82 |
| Total Equity | -\$ | 1,008,884.57 |
| TOTAL LIABILITIES AND EQUITY | \$ | 2,377,484.09 |

Monday, Sep 18, 2023 09:18:42 AM GMT-7 - Accrual Basis

2021 TAX RETURN FILING INSTRUCTIONS

U.S. INCOME TAX RETURN FOR AN S CORPORATION

FOR THE YEAR ENDING DECEMBER 31, 2021

| | DECEMBER 31, 2021 |
|--|---|
| Prepared for | INNVANTAGE GROUP INC. 1585 SOUTH SHIELDS DRIVE WAUKEGAN, IL 60085 |
| Prepared by | SELDEN FOX, LTD. 619 ENTERPRISE DRIVE OAK BROOK, IL 60523-8835 |
| To be signed and dated by | THE APPROPRIATE CORPORATE OFFICER(S). |
| Amount of tax | Total tax \$ 0 Less: payments and credits \$ 0 Plus: other amount \$ 0 Plus: interest and penalties \$ 0 NO PMT REQUIRED \$ 0 |
| Overpayment | Credited to your estimated tax \$ 0 Other amount \$ 0 Refunded to you \$ 0 |
| Make check payable to | NOT APPLICABLE |
| Mail tax return and check (if applicable) to | THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-S TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN. |
| Return must be mailed on or before | RETURN FEDERAL FORM 8879-S TO US BY SEPTEMBER 15, 2022. |
| Special Instructions | ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE SHAREHOLDERS. |

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| Eo | | | leturn for an S Cor | | | OMB No. 1545-0123 |
|---|---------------------|--|---|--|------------------|---|
| FO | m = = | Do not file this form unless the corporation | n has filed or is attaching Form 2553 t 20S for instructions and the latest info | | corporatio | on. 0004 |
| | | of the Treasury | 205 for instructions and the latest info | rmation. | | ZUZI |
| - | | nue Service ar year 2021 or tax year beginning | , ending | | | |
| CD-000-00 | | on effective date Name | , chang | | D Emplo | over identification number |
| | | 11441116 | | | D Empio | yer rachanoanon namber |
| Linearin | Busines | s activity E INNVANTAGE GROUP | INC. | | 8. | 2-2056365 |
| | code nu (see ins | Mumber, street, and room or suite no. If | P.O. box, see instructions. | | E Date in | ncorporated |
| **** | 23 | 8900 | DS DRIVE | | 0: | 9/05/2017 |
| C | | | | | F Total a | assets (see instructions) |
| | attached | MAUKEGAN, IL OU | | | \$ | 2,944,303。 |
| G | | corporation electing to be an S corporation beginning with this | | | . | |
| Н | Check | if: (1) Final return (2) Name change (3) | Address change (4) [Amended | d return (5) L | 」S election | on termination |
| 1 | Chack | he number of shareholders who were shareholders during any | part of the tax year | | - 400 | |
| - | | if corporation; (1) Aggregated activities for section 46 on; Include only trade or business income and expenses on li | nes 1a through 21. See the instruction | e for more inform | ation | ssive activity purposes |
| - | 1 1 2 | Gross receipts 4 052 074 h Return and | G. Bal. Subtract line | 1h from line 1a | 1011. | 4,952,874. |
| | 2 | Cost of goods sold (attach Form 1125-A) | • Bai. Subtract file | ib iroiii iine ia | 2 | -100-101-0 |
| Income | 3 | Gross profit. Subtract line 2 from line 1c | | | 3 | 4,952,874. |
| nco | 4 | Net gain (loss) from Form 4797, line 17 (attach Form 4797) | | | 4 | Birkett Birkster (Birkster (Birkster (Birkster)) spice englishe die fauf entwike Birkster (Birkster) en voor de eng van de englishe verwere |
| General | 5 | | | | | |
| Militario | 6 | Total income (loss). Add lines 3 through 5 | | | > 6 | 4,952,874. |
| (SI | 7 | Compensation of officers (see instrs attach Form 1125-E) | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 7 | 260,000 |
| tior | 8 | Salaries and wages (less employment credits) | | | 8 | 255,178 |
| nita | 9 | Repairs and maintenance | | | | 38,575. |
| - <u>:</u> | 10 | Bad debts | | | 10 | 13,236 |
| oj s | 11 | Rents Taxes and licenses | QTZ TEM | FNT 1 | 11 | 95,466. |
| ion | 13 | Interest (see instructions) | DIAIL | H11/1 T | 13 | 12,904. |
| Deductions (See instructions for limitations) | 14 | Depreciation not claimed on Form 1125-A or elsewhere on re | turn (attach Form 4562) | | 14 | 39,805 |
| nstr | 15 | Depletion (Do not deduct oil and gas depletion.) | (attack, 5111, 1002) | | 15 | 00,000 |
| Ge | 16 | Advertising | | | 16 | |
| Š. | 17 | Pension, profit-sharing, etc., plans | | | 17 | |
| ions | 18 | Employee benefit programs | | | 18 | 83,181. |
| uct | 19 | Other deductions (attach statement) | STATEM | ENT 2 | 19 | 3,193,322. |
| Ded | 20 | Total deductions. Add lines 7 through 19 | | Þ | | 3,991,607. |
| formionesis | 21 | Ordinary business income (loss). Subtract line 20 from line | | | 21 | 162,922. |
| | 22 a | Excess net passive income or LIFO recapture tax (see instruc | | | - | |
| | C | Tax from Schedule D (Form 1120-S) Add lines 22a and 22b | | | 22c | |
| nts | 23 a | 2021 estimated tax payments and 2020 overpayment credited | | | 220 | |
| Уmе | b | Tax deposited with Form 7004 | | | 1 | |
| Pa | С | Credit for federal tax paid on fuels (attach Form 4136) | 23c | | 1 | |
| Tax and Payments | d | Add lines 23a through 23c | | | 23d | |
| ax s | 24 | Estimated tax penalty (see instructions). Check if Form 2220 i | | | 24 | |
| - | 25 | $\textbf{Amount owed.} \ \textbf{If line 23d is smaller than the total of lines 22d} \\$ | | | 25 | |
| | 26 | Overpayment. If line 23d is larger than the total of lines 22c a | nd 24, enter amount overpaid | | 26 | |
| tementories | 27 | Enter amount from line 26: Credited to 2022 estimated tax | | Refunded > | 27 | |
| | belie | er penalties of perjury, I declare that I have examined this return, including f, it is true, correct, and complete. Declaration of preparer (other than taxp | accompanying scriedules and statements, and ayer) is based on all information of which prepa | rer has any knowledgi | wiedge and e. | May the IRS discuss |
| Sig | | 1 | PRESIDEN | TITT | | this return with the preparer shown |
| He | re 📄 | Signature of officer Date | | <u> 1</u> | | below? See instr. X Yes No |
| | Drint C | - | | | | |
| | rinv i yr | pe preparer's name Preparer's sign | Date | Check | if | PTIN |
| Paid Pre- | l . | EL J. DIMARIO | | self- emplo | | P01399939 |
| parer Use | Firm's na | | | | | 36-2985770 |
| Only | Firm's ac | ddress ▶ 619 ENTERPRISE DRIVE | | Phone | no. | |
| | | OAK BROOK, IL 60523-88 | | | 630 | -954-1400 |
| LHA | For | Paperwork Reduction Act Notice, see separate instructions. | 111701 12-23-21 | | | Form 1120-S (2021) |

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| | | | Document Page 15 of 38 | | |
|---|----------|---------------------------|---|-----------|-------------------------------------|
| _ | | 120-S | U.S. Income Tax Return for an S Corporation | | OMB No. 1545-0123 |
| For | rm 📗 📗 | | Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S | corporati | ion. |
| De | partment | t of the Treasury | ▶ Go to www.irs.gov/Form1120S for instructions and the latest information. | | 2021 |
| - | | venue Service | | | |
| _ | | | tax year beginning , ending | 7 | |
| | | ion effective date | | D Empl | loyer identification number |
| simeonin. | - | 05/2017 | INNVANTAGE GROUP INC. | | 0.0000000 |
| | code n | | | | 2-2056365 |
| | (see in | structions) 3 8 9 0 0 | 등 Number, street, and room or suite no. If a P.O. box, see instructions. 법 1585 SOUTH SHIELDS DRIVE | | incorporated 9/05/2017 |
| _ | | if Sch. M-3 | E 1585 SOUTH SHIELDS DRIVE City or town, state or province, country, and ZIP or foreign postal code | | assets (see instructions) |
| | attache | | WAUKEGAN, IL 60085 | \$ | 2,944,303 |
| G | Is the | cornoration elec | exting to be an S corporation beginning with this tax year? Yes X No | μψ | 2,544,505 |
| Н | | | inal return (2) Name change (3) Address change (4) Amended return (5) | S elect | tion termination |
| 1 | | | hareholders who were shareholders during any part of the tax year | | |
| J | Check | k if corporation: | (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section | on 469 pa | assive activity purposes |
| 610HM0 | | | with a dear husiness in come and expenses on lines 12 through 21. See the instructions for more in form | nation | seems detining purposes |
| | | a Gross receipts or sales | | 1c | 4,952,874 |
| | 2 | Cost of goods | s sold (attach Form 1125-A) | 2 | |
| Income | 3 | Gross profit. | Subtract line 2 from line 1c | 3 | 4,952,874 |
| 100 | 4 | Net gain (loss | s) from Form 4797, line 17 (attach Form 4797) | 4 | |
| promet promet | 5 | | (loss) (attach statement) | | |
| | 6 | Total income | (loss). Add lines 3 through 5 | > 6 | 4,952,874 |
| (A) | 7 | Compensatio | n of officers (see instrs attach Form 1125-E) | . 7 | 260,000 |
| ons | 8 | Salaries and v | wages (less employment credits) EMPLOYMENT CR 138,704. | 8 | 255,178 |
| ţ | 9 | | naintenance | | 38,575 |
| 3 | 10 | | | | |
| ō | 11 | | | | 13,236 |
| us f | 12 | Taxes and lice | enses STATEMENT 1 | 12 | 95,466 |
| Deductions (See instructions for limitations) | 13 | | instructions) | | 12,904 |
| ruc | 14 | Depreciation r | not claimed on Form 1125-A or elsewhere on return (attach Form 4562) | . 14 | 39,805 |
| nst | 15 | | o not deduct oil and gas depletion.) | | |
| ee i | 16 | | | | |
| (ÿ | 17 | | it-sharing, etc., plans | | |
| ons | 18 | Employee ben | nefit programs | 18 | 83,181 |
| ıcti | 19 | Other deduction | ons (attach statement) STATEMENT 2 | 19 | 3,193,322 |
| ed | 20 | Total deducti | ons. Add lines 7 through 19 | > 20 | 3,991,607 |
| <u>⊔</u> | 21 | | iness income (loss). Subtract line 20 from line 6 | 21 | 162,922 |
| | 22 a | | ssive income or LIFO recapture tax (see instructions) 22a | _ | |
| | b | Tax from Sche | edule D (Form 1120-S) 22b | | |
| ţ | С | | | 22c | |
| and Payments | 23 a | | ed tax payments and 2020 overpayment credited to 2021 23a | 4 | |
| ayn | b | | with Form 7004 23b | 4 | |
| Ω J | C | | ral tax paid on fuels (attach Form 4136) | _ | |
| | d | | through 23c | 23d | |
| Тах | 24 | | penalty (see instructions). Check if Form 2220 is attached | 24 | |
| | 25 | | . If line 23d is smaller than the total of lines 22c and 24, enter amount owed | - | |
| | 26 | | . If line 23d is larger than the total of lines 22c and 24, enter amount overpaid | - | |
| | 27 Un | | from line 26: Credited to 2022 estimated tax Refunded Figure 1, declare that I have examined this return, including accompanying schedules and statements, and to the best of my kn | > 27 | nd |
| | ı | lief, it is true, correct | jury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kr t, and complete: Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled | je. | I May the IRS discuss |
| 3ig | | | PRESIDENT | | this return with the preparer shown |
| Нe | | Signature of of | | | below? See instr. XYes No |
| | | | | | [|
| | Print/Ty | ype preparer's name | Preparer's signature Date Chec | | PTIN |
| aid re- | DAN | IEL J. I | Self- | oyed | P01399939 |
| arer Ise | Firm's | | TI DINI TON THE | s EIN | 36-2985770 |
| nly | Firm's a | | 19 ENTERPRISE DRIVE | | |

OAK BROOK, IL 60523-8835For Paperwork Reduction Act Notice, see separate instructions. $_{111701}$ $_{12-23-21}$

Form **1120-S** (2021)

630-954-1400

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| Form 1120-S (2021) INNVANTAGE GF | OUP INC. | | | 82-2 | 05636 | 5 F | Page 2 |
|---|--|---|--|--|---|---|---------------------------------|
| Schedule B Other Information (see ins | structions) | | | | | Yes | No |
| 1 Check accounting method: a X Cash b | Accrual c | Other (specify) | ekerülek kilde kulonde tülk. Diele dem un ülin vormisme kovalmik, dem onte bezir dem kunsuk elikib ut lättisid | | | | |
| 2 See the instructions and enter the: | | | 4277-4001-41014-00050628-000-00042-11-C241-024-458-04-61700-000-088-0-08-4-40-4-08-4-08-4-08-4-0 | WOOD TO PROVIDE THE PROPERTY OF THE PROPERTY O | 2000 | | |
| a Business activity >> FINISH CARPEN | TRY SER b | Product or service ⊳ 🛚 | FINISH CAR | PENTRY | SER | | |
| 3 At any time during the tax year, was any shareholder of | f the corporation a disreg | jarded entity, a trust, an c | estate, or a | | | | |
| nominee or similar person? If "Yes," attach Schedule B | -1, Information on Certai | n Shareholders of an S C | orporation | | | 200020000000000000000000000000000000000 | X |
| 4 At the end of the tax year, did the corporation: | | | | | | | |
| a Own directly 20% or more, or own, directly or indirectl | y, 50% or more of the tot | tal stock issued and outs | tanding of any | | | | - |
| foreign or domestic corporation? For rules of construc | tive ownership, see instru | uctions. If "Yes," complet | e (i) through (v) below | | | | X |
| (i) Name of Corporation | (ii) Employer Identification Number | | ountry of | (iv) Percentage of Stock | (v) If Perc 100% , Enter t a Qualifie Subsidiary E | entage in he Date (i | (iv) is f app <u>l</u> icabl |
| (., | (if any) | Incorp | poration | Owned | Subsidiary E | d Subcha lection W | pter S as Made |
| | | | | | | | |
| | | | | | | normality version in the | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| b Own directly an interest of 20% or more, or own, direct | ly or indirectly, an interes | st of 50% or more in the | profit, loss, or | | | | |
| capital in any foreign or domestic partnership (includin | | | | | | | |
| trust? For rules of constructive ownership, see instruct | ions. If "Yes," complete (i |) through (v) below | | | | | X |
| (i) Name of Entity | (ii) Employer Identification Number | (iii) Type of Entity | | untry of | Per | (v) Maxir centage C | num)wned in |
| | (if any) | | Urgai | nization | | fit, Loss, o | |
| | | | | | | | |
| - | | | | P. D. Salle and December 1981 and the Association of Section 2011 | | | |
| | | | | | | | |
| | | *************************************** | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 5a At the end of the tax year, did the corporation have any | outstanding shares of res | stricted stock? | | | | | X |
| If "Yes," complete lines (i) and (ii) below. | | | | | | į | |
| (i) Total shares of restricted stock | | | > | | | | |
| | | | | | | | |
| $\mathbf{b}At$ the end of the tax year, did the corporation have any | outstanding stock option | s, warrants, or similar in | struments? | | | | X |
| If "Yes," complete lines (i) and (ii) below. | | | | | | | |
| (i) Total shares of stock outstanding at the end of the ta | | | | | | ı | |
| (ii) Total shares of stock outstanding if all instruments v | | | | | | | |
| 6 Has this corporation filed, or is it required to file, Form 8 | | | | | | | X |
| 7 Check this box if the corporation issued publicly offered | | | | | | | |
| If checked, the corporation may have to file Form 8281, | | | | ents. | | l | |
| 8 If the corporation (a) was a C corporation before it elec with a basis determined by reference to the basis of the | | | | | | l | |
| corporation, and (b) has net unrealized built-in gain in e | xcess of the net recognize | ed built-in gain from orig | r vears. | | | | |
| enter the net unrealized built-in gain reduced by net reco | gnized built-in gain from | prior years | > \$ | | | | |
| 9 Did the corporation have an election under section 163(| j) for any real property tra | ade or business or any fa | rming business | | | | |
| | | | | | | | X |
| 10 Does the corporation satisfy one or more of the followin | g? See instructions | | | | | | X |
| a The corporation owns a pass-through entity with curren | t, or prior year carryover, | excess business interes | t expense. | | | | |
| bThe corporation's aggregate average annual gross recei | pts (determined under se | ction 448(c)) for the 3 ta | x years | | | 1 | |
| preceding the current tax year are more than \$26 million | and the corporation has | business interest expens | se. | | | 1 | |
| c The corporation is a tax shelter and the corporation has | business interest expens | e. · | | | | | |
| If "Yes," complete and attach Form 8990. | | | | | | | |
| 11 Does the corporation satisfy both of the following condit | | | | | | | X |
| a The corporation's total receipts (see instructions) for the | tax year were less than \$ | \$250,000. | | | | | |
| ${\bf b}$ The corporation's total assets at the end of the tax year ${\bf v}$ | vere less than \$250,000. | | | | | | |
| If "Yes," the corporation is not required to complete Sche | dules L and M-1. | | | | | | |
| 111711 12-23-21 | | 0 | | F | orm 1120 |)-S (2 | 2021) |

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| Schooldup St Other Information (see instructions) (continued) Yes Red Re | Process Community of the Community of th | 1120-S (2021) INNVANTAGE GROUP INC. | 82 | 2-2056365 Page 3 |
|--|--|--|---------------------------|--|
| 1 | Sc | hedule B Other Information (see instructions) (continued) | manuscript and the second | |
| 13 During the tax year, was a qualified subologing for subsidiary elegation terminated or availability (1945) 2 2 2 3 4 2 4 4 4 4 4 4 4 4 | | | | MEDICAZINIA CHI DA DANI MARKAMININI MENINZINI |
| The corporation file or will it the corporation attaching Form 8985 (line 15) Schodule K Shareholders* Pro Rata Shareholders* | 13 Dı | uring the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions | | X |
| 15 is the corporation attaching Form 8988 to certify as a Qualified Opportunity Fund? | 14 a Di | d the corporation make any payments in 2021 that would require it to file Form(s) 1099? | | |
| 15 is the composition state-bling from 9996 to certify as a Casillard Operatinity Fund? 5 5 5 | b lf ' | "Yes," did the corporation file or will it file required Form(s) 1099? | | |
| Schedule K Shareholders* Pro Reta Share Items | 15 ls | the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? | | X |
| 1 | If ' | "Yes," enter the amount from Form 8996 , line 15 \$ | | |
| 2 Retractial real estate income (loss) (attach Form 8825) 5a | Scl | | | |
| Sa Differ gross rental income (loss) 3a 3b 3b 3b 3b 3b 3b 3b | | 1 Ordinary business income (loss) (page 1, line 21) | 1 | 162,922. |
| B Expanses from other rental activities (statich statement) Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental income (loss), Subtract line 3b from line 3a Colten net rental line 3b from line 3a | | | 2 | |
| Colter net retail moome [loss], Subtract line 38 3c 4 Interest income 4 4 5c 10 | | | | |
| | | b Expenses from other rental activities (attach statement) 3b | | |
| 5 Dividentis; a Crolinary dividends 5a | | c Other net rental income (loss). Subtract line 3b from line 3a | 3 c | |
| Recommendate Reco | (SS) | 4 Interest income | 4 | |
| Recommendate Reco | ő | 5 Dividends: a Ordinary dividends | 5a | |
| Recommendate Reco | Je (| b Qualified dividends 5b | - Contracting | |
| Recommendate Reco | no: | 6 Royalties | 6 | |
| 8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) 8b | Ĕ | 7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) | 7 | |
| Contract | | | | |
| Contract | | b Collectibles (28%) gain (loss) | | |
| 9 Net section 123 t gain (loses) (attach Form 4797) 9 | | c Unrecaptured section 1250 gain (attach statement) 8c | | |
| 10 | | 9 Net section 1231 gain (loss) (attach Form 4797) | 9 | |
| 11 Section 179 deduction (attach Form 4562) 12 a Charitable contributions 12 a 12 b | | | | 1 |
| 12 a 12 b | Econolista de Carrollano | 11 Section 179 deduction (attach Form 4562) | 11 | |
| b Investment interest expense 12b 12c | ns | | 12a | |
| 13 a Low-income housing credit (section 42(i)(5)) 13a 13b 13b 13b 13b 13c | ÷ | | 12b | |
| 13 a Low-income housing credit (section 42(i)(5)) 13a 13b 13b 13b 13b 13c | onp | Section 59(e)(2) | 12c | |
| 13 a Low-income housing credit (section 42(i)(5)) 13a 13b 13b 13b 13b 13c 13b 13c | Ď | Other deductions d (see instructions) Type | 12d | |
| b Low-income housing credit (other) c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if applicable) d Other rental real estate) (attach Statech Form 3468, if ap | Portable Service Control Control | | 13a | |
| C Qualified rehabilitation expenditures (rental real estate) (attach Form 3488, if applicable) Observabler getable of Observable getable of Observabler getable of Observable getable getable of Observable getable getable getable getable getable of Observable getable get | | b Low-income housing credit (other) | 13b | |
| d Other rendal real state credits sea instructions Type logical credits and properties are instructions of the credits ges instructions of the credits ges instructions of the credits and the credits are instructions of the credits | ţ | c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) | 13c | |
| The contraction of the credit (attach Form 6478) 13f 13g 1 | edi | JOHNET rental real estate | 13d | |
| f Biofuel producer credit (attach Form 6478) g Other credits g | ڻ | e Other rental credits (See instructions) Type | 13e | |
| 13g 13g 13g 14 Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items - International, and check this box to indicate you are reporting items of international tax relevance 15a -1,011. | | f Biofuel producer credit (attach Form 6478) | 13f | |
| Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items - International, and check this box to indicate you are reporting items of international tax relevance Total Post-1986 depreciation adjustment | | Other credits g (see instructions) Type | 13g | |
| 15a Post-1986 depreciation adjustment 15a -1,011. | le St | | | Jane Common Commo |
| 15a Post-1986 depreciation adjustment 15a -1,011. | ion | 14 Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items - International, and | | |
| 15a Post-1986 depreciation adjustment 15a -1,011. | nat | check this box to indicate you are reporting items of international tax relevance | | |
| 15a Post-1986 depreciation adjustment 15a -1,011. | teri | | | |
| b Adjusted gain or loss c Depletion (other than oil and gas) d Oil, gas, and geothermal properties - gross income e Oil, gas, and geothermal properties - deductions f Other AMT items (attach statement) 156 156 157 158 150 150 150 150 150 150 150 | 드는 | | | |
| b Adjusted gain or loss c Depletion (other than oil and gas) d Oil, gas, and geothermal properties - gross income e Oil, gas, and geothermal properties - deductions f Other AMT items (attach statement) 156 156 157 158 150 150 150 150 150 150 150 | *************************************** | 15 a Post-1986 depreciation adjustment | 15a | -1,011. |
| f Other AMT items (attach statement) 15f 16a Tax-exempt interest income b Other tax-exempt income c Nondeductible expenses d Distributions (attach statement if required) e Repayment of loans from shareholders 16a 200,541. 16b 200,541. | Ve Tax | | 15b | |
| f Other AMT items (attach statement) 15f 16a Tax-exempt interest income b Other tax-exempt income c Nondeductible expenses d Distributions (attach statement if required) e Repayment of loans from shareholders 16a 200,541. 16b 200,541. | ati In Ite | | 15c | |
| f Other AMT items (attach statement) 15f 16a Tax-exempt interest income b Other tax-exempt income c Nondeductible expenses d Distributions (attach statement if required) e Repayment of loans from shareholders 16a 200,541. 16b 200,541. | Tine (1) | d Oil, gas, and geothermal properties - gross income | 15d | |
| f Other AMT items (attach statement) 15f 16a Tax-exempt interest income b Other tax-exempt income c Nondeductible expenses d Distributions (attach statement if required) e Repayment of loans from shareholders 16a 200,541. 16b 200,541. | Alia | e Oil, gas, and geothermal properties - deductions | 15e | |
| 16 a Tax-exempt interest income 16 a | | f Other AMT items (attach statement) | | |
| b Other tax-exempt income c Nondeductible expenses d Distributions (attach statement if required) e Repayment of loans from shareholders f Foreign taxes paid or accrued STATEMENT 3 16b 200,541. 16d 16d 16d | ng r | 16 a Tax-exempt interest income | | |
| C Nondeductible expenses C Nondeductible ex | Ide | b Other tax-exempt income STATEMENT 3 | | 200,541. |
| d Distributions (attach statement if required) e Repayment of loans from shareholders f Foreign taxes paid or accrued 166 166 | Affe sho asis | c Nondeductible expenses STATEMENT 4 | | |
| e Repayment of loans from shareholders f Foreign taxes paid or accrued 166 | ns / nare Be | d Distributions (attach statement if required) | | |
| f Foreign taxes paid or accrued 16f | Sh | | | |
| | | | | |

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| Total amount Tota | For | m 1120S (2021) INNVANTAGE | E GROUP INC. | | | 82- | -2056365 | Page 4 |
|--|-----|--|-----------------------------------|--|--|-------|--|------------------------|
| Second S | 6 | Schedule K Shareholders' Pro Rata Sha | re Items (continued) | Security and an activities and activities activities and activities activities and activities activities and activities activities activities and activities acti | | | Total amount | |
| 170 | | | | | | 17a | | |
| Schedule L Balance Sheets per Books Beginning of tax year End of tax year | 9 | b Investment expenses | | | | 17b | | |
| Schedule L Balance Sheets per Books Beginning of tax year End of tax year | ÷ | c Dividend distributions paid from accur | mulated earnings and profits | | | 17c | | |
| Schedule L Balance Sheets per Books Beginning of tax year End of tax year | | d Other items and amounts (at stort) | 5 1 | STATEN | IENT 5 | | | |
| Schedule L Balance Sheets per Books Beginning of tax year End of tax year | | [au. still.] | | | | t | | |
| Schedule L Balance Sheets per Books Beginning of tax year End of tax year | 200 | 18 Income (loss) reconciliation Combin | ne the amounts on lines 1 through | 10 in the far right column | | | | |
| Schedule L Balance Sheets per Books Beginning of tax year End of tax year | Ö. | From the result subtract the sum of the | ũ . | 9 | | 18 | 162 | 922. |
| Cash | (| Trem the recard contract the cam of the | | | | - | | - Carlan V |
| Cash | L | | (a) | (d) | (c) | | (d) | WINDOWS CO. |
| 2 a Trade notes and accounts receivable 597,563 578,412 578,412 5858 allowance for had debts 597,563 578,412 5 | 1 | Cash | | | | | 552.0 | 622. |
| Description Section | 2 8 | Trade notes and accounts receivable | 597,563 | | 578. | 412. | | |
| 1 | | | | 597.563.4 | | | 578.4 | 412. |
| U.S. government obligations Tax-exempt securities | | | | | | | | |
| Tax-exempt securities Characteristics Char | | | | | | | | |
| 6 Other current assets (att. stmt.) 7 Loans to shareholders 8 Mortgage and real estate loans 9 Other investments (att. stmt.) 10 a Buildings and other depreciable assets 1 1 Depletable assets 1 Less accumulated depreciation 1 Depletable assets 1 Less accumulated depletion 1 Land (net of any amortization) 1 Land (net of any amortization) 1 Less accumulated amortization 1 Other assets (att. stmt.) 1 Total assets 1 Less accumulated amortization 1 STATEMENT 6 1, 385. 2 Capital stock 3 Capital stock 1 1, 100. 3 CAdystments to shareholders' equity (att. stmt.) 3 Capital stook 4 Counts payable in 1 year or more 3 Capital stock 5 Capital stock 5 Capital stock 5 Capital stock 5 Capital stock 6 Capital stork 7 Capital idabilities and shareholders' equity (att. stmt.) 7 Capital idabilities and shareholders' equity (att. stmt.) 8 Capital stock 9 Capital stock 1 | | | | | | | | |
| Total assets Tota | | | | | | | | |
| Mortgage and real estate loans 9 Other investments (att. stmt.) 10 a Buildings and other depreciable assets 313,330 s 122,447 (230,688 s) 164,642 s 180 190 1883 s 122,447 (230,688 s) 164,642 s 180 190 1883 s 180 | | | | | | | 1 6/18 / | 527 |
| 9 Other investments (att. stmt.) 10 a Buildings and other depreciable assets | - | | | | | | I,040,0 | 0470 |
| 10 a Buildings and other depreciable assets 190,883 122,447 230,688 164,642 190,883 122,447 230,688 164,642 190,883 122,447 230,688 164,642 190,883 122,447 230,688 164,642 190,883 164,642 190,883 164,642 190,883 164,642 190,883 164,642 190,883 164,642 190,883 | _ | | | | TO STORE AND | | | |
| Description 190,883 122,447 230,688 164,642 | - | | 212 220 | | 205 | 220 | And Control and the Control and the Control and Contro | menocialmoscus menthed |
| 11 a Depletable assets | | | | 100 447 | | | 1 () | C 4 O |
| Less accumulated depletion (| | | [190,883.] | 122,44/。 | 230, | 088.) | 164,6 | O 4 Z 。 |
| 12 Land (net of any amortization) | | | | | | | | |
| 13 a Intangible assets (amortizable only) b Less accumulated amortization () () () 14 Other assets (att. stmt.) 15 Total assets Liabilities and Shareholders' Equity 16 Accounts payable | | | () | | | | | |
| b Less accumulated amortization () () () () () () () () () (| | | | | | | | |
| 14 Other assets (att. stmt.) 793,567. 2,944,303. 15 Total assets 793,567. 2,944,303. Liabilities and Shareholders' Equity 113,730. 58,914. 16 Accounts payable 113,730. 58,914. 17 Mortgages, notes, bonds payable in less than 1 year 20. 113,730. 113,730. 18 Other current liabilities (att. stmt.) STATEMENT 6 1,385. 0. 19 Loans from shareholders 273,218. 427,566. 20 Mortgages, notes, bonds payable in 1 year or more 20. 2,000,000. 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Capital stock 1,100. 1,100. 23 Additional paid-in capital 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) 25 Adjustments to shareholders' equity (att. stmt.) 2,944,303. 26 Less cost of treasury stock () 2,944,303. | | | | | | | | |
| Total assets | b | | () | (| |) | | |
| Liabilities and Shareholders' Equity Accounts payable 113,730. 58,914. 17 Mortgages, notes, bonds payable in less than 1 year 58,914. 18 Other current liabilities (att. stmt.) STATEMENT 6 1,385. 0. 19 Loans from shareholders 273,218. 427,566. 20 Mortgages, notes, bonds payable in 1 year or more 2 2,000,000. 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Capital stock 1,100. 1,100. 23 Additional paid-in capital 456,723. 24 Retained earnings STATEMENT 8 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) 456,723. 2,944,303. 26 Less cost of treasury stock () () 27 Total liabilities and shareholders' equity 793,567. 2,944,303. | | Other assets (att. stmt.) | | | | | | |
| Liabilities and Shareholders' Equity Accounts payable 113,730 。 58,914 。 17 Mortgages, notes, bonds payable in less than 1 year ———————————————————————————————————— | 15 | Total assets | | 793,567。 | | | 2,944,3 | 303. |
| 17 Mortgages, notes, bonds payable in less than 1 year STATEMENT 6 1,385. 0. 18 Other current liabilities (att. stmt.) STATEMENT 6 1,385. 427,566. 19 Loans from shareholders 273,218. 427,566. 20 Mortgages, notes, bonds payable in 1 year or more 2 2,000,000. 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Gapital stock 1,100. 1,100. 1,100. 23 Additional paid-in capital STATEMENT 8 404,134. 456,723. 24 Retained earnings STATEMENT 8 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) Less cost of treasury stock () () 27 Total liabilities and shareholders' equity 793,567. 2,944,303. - | | | | | | | | |
| 17 Mortgages, notes, bonds payable in less than 1 year STATEMENT 6 1,385. 0. 18 Other current liabilities (att. stmt.) STATEMENT 6 1,385. 0. 19 Loans from shareholders 273,218. 427,566. 20 Mortgages, notes, bonds payable in 1 year or more 2 2,000,000. 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Capital stock 1,100. 1,100. 1,100. 23 Additional paid-in capital STATEMENT 8 404,134. 456,723. 24 Retained earnings STATEMENT 8 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) 2 () 26 Less cost of treasury stock () () 27 Total liabilities and shareholders' equity 793,567. 2,944,303. | 16 | Accounts payable | | 113,730. | | | 58,9 | 914. |
| 19 Loans from shareholders 273,218. 427,566. 20 Mortgages, notes, bonds payable in 1 year or more 2 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Capital stock 1,100. 1,100. 23 Additional paid-in capital 2 24 Retained earnings STATEMENT 8 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) 2 () 26 Less cost of treasury stock () () 27 Total liabilities and shareholders' equity 793,567. 2,944,303. | 17 | | | | | | | |
| 19 Loans from shareholders 273,218. 427,566. 20 Mortgages, notes, bonds payable in 1 year or more 2 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Capital stock 1,100. 1,100. 23 Additional paid-in capital 2 24 Retained earnings STATEMENT 8 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) 2 26 Less cost of treasury stock () (27 Total liabilities and shareholders' equity 793,567. 2,944,303. | 18 | Other current liabilities (att. stmt.) | STATEMENT 6 | | - | | | |
| 20 Mortgages, notes, bonds payable in 1 year or more 21 Other liabilities (att. stmt.) STATEMENT 7 0 . 2 ,000 ,000 . 2 ,000 ,000 . 2 ,000 ,000 . 1 ,100 . 1 ,100 . 1 ,100 . 2 ,000 ,000 . 2 ,0 | 19 | Loans from shareholders | | 273,218. | | | 427,5 | 566. |
| 21 Other liabilities (att. stmt.) STATEMENT 7 0. 2,000,000. 22 Capital stock 1,100. 1,100. 23 Additional paid-in capital 24 Retained earnings STATEMENT 8 404,134. 456,723. 25 Adjustments to shareholders' equity (att. stmt.) 26 Less cost of treasury stock () () 27 Total liabilities and shareholders' equity 793,567. 2,944,303. | 20 | | | | | | | |
| 22 Capital stock 1,100. 1,100. 23 Additional paid-in capital | 21 | | STATEMENT 7 | 0. | | | 2,000,0 | 000. |
| 23 Additional paid-in capital | 22 | | | 1,100. | | | 1,1 | 00. |
| Retained earnings STATEMENT 8 404,134. 456,723. Adjustments to shareholders' equity (att. stmt.) Less cost of treasury stock () () Total liabilities and shareholders' equity 793,567. 2,944,303. | 23 | Additional paid-in capital | | | | | | |
| 25 Adjustments to shareholders' equity (att. stmt.) 26 Less cost of treasury stock 27 Total liabilities and shareholders' equity 28 Total liabilities and shareholders' equity 29 Total liabilities and shareholders' equity 20 Total liabilities and shareholders' equity | 24 | | STATEMENT 8 | 404,134. | and the second section of the sect | | 456,7 | 723. |
| 26 Less cost of treasury stock () () 27 Total liabilities and shareholders' equity 793,567. 2,944,303. | 25 | · · · · · · · · · · · · · · · · · · · | | | | | | |
| 27 Total liabilities and shareholders' equity 793,567. 2,944,303. | 26 | | (| | | (| |) |
| | 27 | ľ | | 793,567. | | T | 2,944,3 | 303. |
| | | | | | | | | ACCORDING TO A STREET |

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| | GROUP INC. | | | -2056365 Page 5 |
|--|--|--|--|--------------------------------|
| Schedule M-1 Reconciliation of | f Income (Loss) per | Books With Income | (Loss) per Return | |
| Note: The corporation ma | ay be required to file Schedul | | | |
| 1 Net income (loss) per books | 52,589。 | 5 Income recorded on boo | ks this year not | |
| 2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, | | included on Schedule K, | lines 1 through | |
| 6, 7, 8a, 9, and 10, not recorded on books this year | | 10 (itemize): | | |
| (itemize): | | a Tax-exempt interest | | |
| MACH Chicago believe (Co. Chicago believe control cont | | STMT 10 | 61,393. | 61,393. |
| 3 Expenses recorded on books this year not | | 6 Deductions included on | Schedule K, lines 1 | |
| included on Schedule K, lines 1 through 12 | | through 12 and 16f, not | charged against | |
| and 16f (itemize): | | book income this year (i | | |
| a Depreciation \$ | | a Depreciation \$ | | |
| b Travel and entertainment \$ STMT 9 171,726. | 171 706 | \$8600\$2804400468860000000000000000000000000000 | | |
| STMT 9 171,726. | 171,726. | 7 Add lines 5 and 6 | | 61,393. |
| 4 Add lines 1 through 3 | 224,315. | | e 18). Subtract line 7 from line 4 | 162,922. |
| Schedule M-2 Analysis of Accu | mulated Adjustmen I. Accumulated Fari | its Account, Shareh aings and Profits, ar | olders' Undistributed nd Other Adjustment | d Taxable Income |
| 1 John Stary Turker | (a) Accumulated adjustments account | (b) Shareholders' undistributed taxable | (c) Accumulated earnings and profits | (d) Other adjustments account |
| d Dalamandharianian filman | | income previously taxed | Carringo arra promo | |
| 1 Balance at beginning of tax year | 404,134. | | | |
| 2 Ordinary income from page 1, line 21 | 162,922. 200,541. | | STATEMENT 12 | 200 E41 |
| 3 Other additions STATEMENT 11 | 200,341. | | STATEMENT 17 | 200,541. |
| 4 Loss from page 1, line 21 | (163,353.) | | STATEMENT 14 | (200,541.) |
| 5 Other reductions STATEMENT 13 | | | P.T.W.T.EMEINT, TA | (200,541.) |
| 6 Combine lines 1 through 5 | 604,244. | | | |
| 7 Distributions | | | | |
| 8 Balance at end of tax year. Subtract line | 604,244. | | | ^ |
| 7 from line 6 | 002,232. | | | 0. |
| | | | | Form 1120-S (2021) |

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Form 1125-E

Compensation of Officers

(Rev. October 2016)

Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

Employer Identification number

INNVANTAGE GROUP INC. 82-2056365

| (a) Name of officer | (b) Social security | (C) Percent of | Percent of s | tock owned | (f) Amount of |
|--|--|---|--------------|---------------|--|
| (a) Name of officer | number | time devoted to business | (d) Common | (e) Preferred | compensation |
| JIM STIVERS | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | 100% | 50.00% | | 130,00 |
| DEAN THEO | ***** | 100% | 50.00% | | 130,00 |
| | | | | | |
| | | ##COSSCOMMONEMACONSWIPSOCIONACIONACIONACIONACIONACIONACIONACION | | | |
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| | | | | | |
| Total compensation of officers | | | | 2 | 260,00 |
| Compensation of officers claimed on Form 1125-A or elsew | vhere on return | | | 3 | |
| Subtract line 3 from line 2. Enter the result here and on Form | | | | | No. of the control of |

For Paperwork Reduction Act Notice, see separate instructions.

Form 1125-E (Rev. 10-2016)

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Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

Go to www ire gov/Form4562 for instructions and the latest information

OMB No. 1545-0172

OTHER

Attachment Sequence No. 179

| Name(s) shown on return | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 | 011114302 101 11 | | | | | Identifying number |
|--|--|--|----------------------------|--|----------------|--|----------------------------|
| | | | | | | 722 | 00 00 5 6 3 6 5 |
| | orty Under Coetien | (70 Moževic | | | | | 82-2056365 |
| | arty under Section | 179 Note: If you | have any I | isted property, | complete Par | | |
| 1 Maximum amount (see instructions) | | | | | | | 1,050,000 |
| | Ilection To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V beform a amount (see instructions) st of section 179 property placed in service (see instructions) an in limitation. Subtract line 3 from line 2. If zero or less, enter -0. 4 attors for tax year. Subtract line 4 from line 1. If zero or less, enter -0. If married filing separately, see instructions (s) Description of property (b) Cest (business use only) (c) Description of property. Add amounts in column (c), lines 6 and 7. 3 deduction. Enter the amount from line 29 are of disallowed deduction from line 13 of your 2020 Form 4562. 5 income limitation. Enter the smaller of line 5 or line 8. 9 er of disallowed deduction to 2022. Add lines 9 and 10, but don't enter more than line 1. 179 expense deduction. Add lines 9 and 10, but don't enter more than line 1. 18 pecial Depreciation Allowance and Other Depreciation (Don't include listed property.) 19 dependent of a from 156(f)(1) election great and 10 | | | 5,000 | | | |
| | Business or activity to which this form relates TAGE GROUP INC. Continued to Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V in amount (see instructions) at of section 179 property placed in service (see instructions) do oost of section 179 property before reduction in limitation in limitation. Subtract line 3 from line 2. If zero or less, enter 0- too for tax year. Subtract line 3 from line 2. If zero or less, enter 0- too for tax year. Subtract line 4 so fine 1. If zero is less, enter 0- (in) Description of property. (in) Description of property. (in) Description of property. Add amounts in column (o), lines 6 and 7. It deduction. Enter the amount from line 29. (in) Cont. The smaller of line 5 or line 8 red deduction. Enter the smaller of line 5 or line 8 red deduction. Enter the smaller of line 5 or line 8 red deduction. Enter the smaller of line 5 or line 8 red deduction. Add lines 9 and 10, but don't enter more than line 11 red for 6 disallowed deduction to 2022. Add lines 9 and 10, less line 12. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) especiation allowance for qualified property (other than listed property) placed in service during a property lines and lines 1 are subject to section 188(f)(1) election preciation (including ACRS) MACRS Depreciation for Assets Placed in service in tax years beginning before 2021 Classification of property Continued lines are larged to thing the tax year line one or more general asset accounts, check here | | | 2,620,000 | | | |
| | Business or activity to which this form relates GE GROUP INC. OTHER DEPRECIATION on To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before nount (see instructions) section 179 property before reduction in limitation Jimitation. Subtract line 3 from line 2. If zero or less, enter -0- (a) Description of property (b) Cost (business use only) FEM Section 179 property before reduction in limitation (a) Description of property (b) Cost (business use only) (c) Elected cost FEM Section 179 property (b) Cost (business use only) (c) Elected cost FEM Section 179 property Add amounts in column (c), lines 6 and 7 and description of property. Add amounts in column (c), lines 6 and 7 and description 179 property. Add amounts in column (c), lines 6 and 7 and allowance deduction from line 13 of your 2020 Form 4562 The property of the section 179 property. Add lines 9 and 10, but don't enter more than line 11 The expense deduction Add lines 9 and 10, but don't enter more than line 11 The expense deduction to 2022. Add lines 9 and 10, but don't enter more than line 11 The expense deduction to 2022. Add lines 9 and 10, less line 12 Part II or Part III below for listed property, Instead, use Part V. Cala Depreciation Allowance and Other Depreciation (Don't include listed property) catalon allowance for qualified property (other than listed property) placed in service during the catalogue of the service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in service During 2021 Tax Year Using the General Depreciation Syst afficiation (Don't include listed property (Designation depression perfect) Section B - Assets Placed in service During 2021 Tax Year Using the General Depreciation Syst afficiation of property (b) Least for depression perfect of the perfect o | | 1,050,000 | | | | |
| | | | | | | | 1,050,000 |
| 6 (a) Description of p | Toperty | and contract to the contract of the contract o | (D) Cost (Dusi | | | | name: |
| T. T.VIT. O. T.O. T. D. T. | | | | 3,0000 | | ,000 | 2 |
| | | | | | | TO THE STATE OF TH | esia . |
| | | | | | | WCCMSS-More Reference For County (2) | non- |
| 7 Listed purposity Enterthe apparent from | - li 00 | | | | | | |
| | | | | | | Ι. | 5,000 |
| | | | | | | | 5,000 |
| 10 Carryover of disallowed deduction from | | 020 Form 4562 | | | | | 5,000 |
| | | | | | | | 1 0 . |
| | | | | | | | 0. |
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| | | | | 👂 13 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | | and or proved the property | e listed propert | v 1 | | |
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| | | • | ,. | | Ü | 14 | |
| 2 | | | | | | | |
| | | | | | | 1 | |
| | | | | <u> </u> | | 1 10 | |
| | | | | | | | |
| 17 MACRS deductions for assets placed | n service in tax ve | ears beginning b | before 202 | 1 | | 17 | 26,198. |
| | | | | | | j. | |
| | | | | | | ation Syst | :em |
| (a) Classification of property | year placed | (business/inves | stment use | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
| 19a 3-year property | | | | | | | |
| b 5-year property | | | | | | | |
| c 7-year property | | | | | | | |
| d 10-year property | | | | | | | |
| e 15-year property | | | | | | | |
| f 20-year property | | | | | | | |
| g 25-year property | | | | 25 yrs. | | S/L | |
| I Build the life | / | | | 27.5 yrs. | MM | S/L | |
| h Residential rental property | / | | | 27.5 yrs. | MM | S/L | |
| : Name and a still word a superior | 7 /21 | 7 | 7,000. | 39 yrs. | MM | S/L | 82. |
| i Nonresidential real property | / | | | | MM | S/L | |
| Section C - Assets P | laced in Service | During 2021 Ta | ax Year Us | sing the Alterna | ative Deprec | iation Sys | stem |
| 20a Class life | | _ | | | | S/L | |
| b 12-year | | | | 12 yrs. | | S/L | |
| c 30-year | / | | | 30 yrs. | MM | S/L | |
| d 40-year | / | | | 40 yrs. | MM | S/L | |
| Part IV Summary (See instructions.) | | | | NAME OF THE PERSON OF THE PERS | | | panis |
| 21 Listed property. Enter amount from line | 28 | | | | | 21 | 13,525. |
| 22 Total. Add amounts from line 12, lines | 4 through 17, line | s 19 and 20 in | column (g) | , and line 21. | | | |
| Enter here and on the appropriate lines | | | | | | 22 | 39,805. |
| 23 For assets shown above and placed in | service during the | current year, e | nter the | | | | |
| portion of the basis attributable to secti | on 263A costs | | | 23 | | | |

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| Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expectable, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. | r | | -2056 | | |
|--|---|----------------------|--|---------|---|
| Note: For any vehicle for which you are using the standard mileage rate or deducting lease expended. 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. | TOP | | | | |
| 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. | ense cor | molete o | nly 24a | | |
| | 21130, 001 | TIPICEC 0 | 111y 2-7a, | | |
| Section A - Depreciation and Other Information (Caution: See the instructions for limits for | r passen | iger auto | mobiles | .) | |
| 24a Do you have evidence to support the business/investment use claimed? X Yes No 24b If "Yes," is | the evide | ence wri | tten? 🚨 | Yes | |
| (a) (b) (c) (d) (e) (f) Type of property Date Business/ Basis for depreciation Property MA | (g) | | (h) | | (i) |
| Type of property placed in investment Cost of (business/investment Recovery IVI | lethod/ nvention | | reciation duction | | lected ion 179 |
| (list vehicles first) precod iii iiivosinicit other basis use only) period Cor | ivention | l dec | Juction | | cost |
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| used more than 50% in a qualified business use | 25 | | | | |
| 26 Property used more than 50% in a qualified business use: | | | | | |
| | DB-HI | | | | |
| TRUCKS 011518100.00% 117,406. 117,406.5.00 2001 | DB-HI | Y 13, | ,525 . | | |
| :: % | | | | | |
| 27 Property used 50% or less in a qualified business use: | | | | | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX |
| :: % | | T | | 1 | |
| : : % S/L- | | 1 | derkombens i disemberen i dimba i gische | - | |
| | | - | | - | |
| | 1 00 | 113 | 525. | - | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 | | _! | | - | |
| 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 | | | 29 | _ | |
| Section B - Information on Use of Vehicles | | | | | |
| Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or relate | | , | | | es |
| to your employees, first answer the questions in Section C to see if you meet an exception to completing this | section f | for those | e vehicle | S. | |
| | | | | | |
| (a) (b) (c) | (d) | (| e) | | (f) |
| 9 | hicle | Vel | hicle | Ve | hicle |
| year (don't include commuting miles) | | | | | |
| 31 Total commuting miles driven during the year | | | | | |
| 32 Total other personal (noncommuting) miles | | 1 | | | ************* |
| driven | | | | | |
| | | | - | | |
| | | 1 | | | |
| 33 Total miles driven during the year. | | | | | |
| 33 Total miles driven during the year. Add lines 30 through 32 | l No | Voc | l No | Vac | T No. |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes | No | Yes | No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? Add lines 30 through 32 Yes No Yes No Yes No Yes | No | Yes | No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more | No | Yes | No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? | No | Yes | No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal | No | Yes | No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? | | | . No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal | | | No | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their | Employe | ees | | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by e | Employe | ees | | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. | Employee: | ees s who ar | | Yes | No |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting | Employee: | ees s who ar | | | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? | Employee mployees | ees s who ar | | | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by e more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting and prohibits personal use of vehicles, except commuting and prohibits personal use of vehicles, except commuting and prohibits personal use of vehicles are prohibits personal use of vehicles and prohibits personal use of vehicles are prohibits personal use of vehicles are prohibits personal use of vehicles are | Employee: | ees s who ar | ren't | Yes | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners | Employee: | ees s who ar | ren't | Yes | |
| Total miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? Bo you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? | Employee: | ees s who ar | ren't | Yes | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about | Employee: | ees s who ar | ren't | Yes | |
| Total miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. To you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? | Employee: | ees s who ar | ren't | Yes | |
| Total miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. Section C - Questions to completing Section B for vehicles used by emore than 5% owners or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? Bo you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits all personal use of vehicles, and retain the information received? | Employee: | ees s who ar | ren't | Yes | |
| Total miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. Section C - Questions to to completing Section B for vehicles used by emore than 5% owners or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? Bo you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. | Employee: | ees s who ar | ren't | Yes | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortization | Employee: | ees s who ar | ren't | Yes | |
| Total miles driven during the year. Add lines 30 through 32 | Employee: J, by your your (e) | ees s who ar | ren't | Yes (f) | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortizable (a) (b) Description of costs Amortizable amount Amortizable amount | Employee: | ees s who ar | ren't | Yes | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortizable (a) (b) Description of costs Amortizable amount Amortizable amount | Employee: g, by your your (e) | ees s who ar | ren't | Yes (f) | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortizable (a) (b) Description of costs Amortizable amount Amortizable amount | Employee: g, by your your (e) | ees s who ar | ren't | Yes (f) | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by you personal use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortizable Amortizable Bamortizable Bamortizabl | Employee: g, by your your (e) | ees s who ar | ren't | Yes (f) | |
| Total miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by emore than 5% owners or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners by you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortization (a) Description of costs Description of costs that begins during your 2021 tax year: | Employee: J, by your your (e) Amortizati period or perc | ees s who ar | ren't | Yes (f) | |
| 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Answer these questions to determine if you meet an exception to completing Section B for vehicles used by e more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by yemployees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortization Code | Employee: J, by your your (e) Amortizati period or perc | ees s who ar r | ren't | Yes (f) | |

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2021 DEPRECIATION AND AMORTIZATION REPORT

OTHER DEPRECIATION

OTHER

| Description | - | | , | | | | | OTHER | | | | | | | |
|--|--------------|----------------------------|--|--------|-------|------------------|---|------------------|------------------------|-----------------------|---------------------------|--|-------------------------------|---------------------------|---------------------------------------|
| 7 RQUIPMENT 07/01/17 2000B 7.00 HY17 172,861. 172,861. 172,861. 172,861. 81,169. 26,198. 107,367. 8 TRUCKS 01/15/18 2000E 5.00 HY21 117,406. 117,406. 83,593. 13,525. 97,118. 9 HVAC 07/01/21 SL 39.00 MM:91 7,000. 7,000. 5,000. 5,000. 128S 179 C/O 5.00 HY19E 5,000. 5,00 | Asset No. | Description | Date Acquired | Method | Life | C o n V | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
| ### TRUCKS 01/15/18 200DR 5.00 HY21 117,406. 117,406. 83,593. 13,525. 97,118. 9 HVAC 07/01/21 SL 39.00 MM191 7,000. 5,000. 5,000. 5,000. 5,000. 5,000. - | 6 | TRUCKS | 02/05/13 | 200DB | 5.00 | HY21 | 60,905. | | | | 60,905. | 60,905. | | 0. | 60,905. |
| 9 HVAC 07/01/21 SL 39.00 MM2191 7,000. 7,000. 5,000 | 7 | EQUIPMENT | 07/01/17 | 200DB | 7.00 | ну17 | 172,861. | | | | 172,861. | 81,169. | | 26,198. | 107,367. |
| 10 FIRE SYSTEM | 8 | TRUCKS | 01/15/18 | 200DE | 5.00 | HY21 | 117,406. | | | | 117,406. | 83,593. | | 13,525. | 97,118. |
| LESS 179 C/O * TOTAL OTHER DEPRECIATION 363,172. 5,000. 358,172. 225,667. 39,805. 265,472. CURRENT YEAR ACTIVITY BEGINNING BALANCE 351,172. 0. 0. 351,172. 225,667. 265,390. ACQUISITIONS 12,000. 5,000. 0. 7,000. 0. 82. DISPOSITIONS/RETIRED 0. 0. 0. 0. 0. 0. 0. 0. ENDING BALANCE 363,172. 5,000. 0. 358,172. 225,667. 265,472. | 9 | HVAC | 07/01/21 | SL | 39.00 | MM191 | 7,000. | | | | 7,000. | | | 82. | 82. |
| * TOTAL OTHER DEPRECIATION 363,172. 5,000. 358,172. 225,667. 39,805. 265,472. CURRENT YEAR ACTIVITY BEGINNING BALANCE 351,172. 0. 0. 351,172. 225,667. 265,390. ACQUISITIONS 12,000. 5,000. 0. 7,000. 0. 0. 82. DISPOSITIONS/RETIRED 0. 0. 0. 0. 0. 0. 0. 0. ENDING BALANCE 363,172. 5,000. 0. 358,172. 225,667. 265,472. | 10 | FIRE SYSTEM | 07/01/21 | SL | 15.00 | НУ191 | 5,000. | | 5,000. | | | | 5,000. | 5,000. | |
| CURRENT YEAR ACTIVITY BEGINNING BALANCE 351,172. 0. 0. 351,172. 225,667. 265,390. ACQUISITIONS 12,000. 5,000. 0. 7,000. 0. 0. ENDING BALANCE 363,172. 5,000. 0. 358,172. 225,667. 265,472. | | LESS 179 C/O | | | | | | | | | | | -5,000. | -5,000. | |
| BEGINNING BALANCE ACQUISITIONS 12,000. 0. 0. 351,172. 225,667. 265,390. 82. DISPOSITIONS/RETIRED 0. 0. 0. 0. 351,172. 225,667. 265,390. 82. 0. 0. 363,172. 5,000. 0. 358,172. 225,667. 265,472. | | * TOTAL OTHER DEPRECIATION | | | | | 363,172. | | 5,000. | | 358,172. | 225,667. | | 39,805. | 265,472. |
| BEGINNING BALANCE ACQUISITIONS 12,000. 0. 0. 351,172. 225,667. 265,390. 82. DISPOSITIONS/RETIRED 0. 0. 0. 0. 351,172. 225,667. 265,390. 82. 0. 0. 363,172. 5,000. 0. 358,172. 225,667. 265,472. | | | | | | | | | | | | | | | |
| ACQUISITIONS 12,000. 5,000. 0. 7,000. 0. 225,867. DISPOSITIONS/RETIRED 0. 0. 0. 0. 0. 0. 0. ENDING BALANCE 363,172. 5,000. 0. 358,172. 225,667. 265,472. | | CURRENT YEAR ACTIVITY | | | | | | | | | | | | | |
| DISPOSITIONS/RETIRED 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0 | | BEGINNING BALANCE | | | | | 351,172. | | 0. | 0. | 351,172. | 225,667. | | | 265,390. |
| ENDING BALANCE 363,172. 5,000. 0. 358,172. 225,667. 265,472. | | ACQUISITIONS | | | | | 12,000. | | 5,000. | 0. | 7,000. | 0. | | | 82. |
| 3,000. 0. 330,172. 223,007. | | DISPOSITIONS/RETIRED | | | | | 0. | | 0. | 0. | 0. | 0. | | | 0. |
| | | ENDING BALANCE | TAKEN MATERIAL TO THE TAKEN THE TAKE | | | | 363,172. | | 5,000. | 0. | 358,172. | 225,667. | | | 265,472. |
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| | | | | | | | Note that the property of the | | | | | | | | |

128111 04-01-21

⁽D) - Asset disposed

^{*} ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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INNVANTAGE GROUP INC.

Qualified Business Income (Section 199A)

| Constitution of the | A 5774.7 | PAGE GROUP INC. | <u>u</u> anne(| Business Ind | Joine (Sectio | n 199A) | | | 82-2056365 |
|---------------------|----------|-------------------|---------------------|------------------------------------|---|---------------------------------------|-----------------------------|------------------------|--|
| SSTB | PTP | Description | EIN | Ordinary Business Income (Loss) | Rental Income (Loss) | Royalty Income (Loss) | Section 1231 Gain (Loss) | Other Income (Loss) | Section 179 Deduction |
| | ┼ | TRADE OR BUSINESS | | -504,097. -504,097. | | | | (200) | 50000001 |
| | + | TOTAL | | -504,097. | | | | | |
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| SSTB | PTP | Description | Other Deductions | W-2 Wages | Unadjusted Basis of Assets | Coope Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets | Qualified Business Income | erative W-2 Wages | Reserved | Reserved |
| SSTB | PTP | | Other Deductions | W-2 Wages 653,882. 653,882. | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172, 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172, 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172, 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172, 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |
| SSTB | PTP | TRADE OR BUSINESS | Other Deductions | i i | Unadjusted Basis of Assets 363,172. 363,172. | Qualified Business Income | | Reserved | Reserved |

Qualified REIT dividends _______

Section 263(a) 1(£) Minimis Safe Harbor Election

Innvantage Group Inc. 1585 South Shields Drive Waukegan, IL 60085

Employer Identification Number: 82

N

056365

For the Year Ending December 31, 2021

Innvantage Group Inc. is election under Reg. Sec. making the de 1.263(a)-1(f). minimis safe harbor

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| INNVANTAGE GROUP INC | Document Page 26 of 38 | 82-2056365 |
|---|-------------------------|---------------------|
| FORM 1120S | TAXES AND LICENSES | STATEMENT (|
| DESCRIPTION | | AMOUNT |
| BUSINESS LICENSES & PE | RMITS | 10,208 |
| OTHER TAXES | | 8,134 |
| PAYROLL TAXES REAL ESTATE TAXES | | 50,941, |
| REAL ESTATE TAXES ILLINOIS TAXES - BASED | ON INCOME | 21,218, 4,965, |
| TOTAL TO FORM 1120S, P | AGE 1, LINE 12 | 95,466 |
| | | |
| FORM 1120S | OTHER DEDUCTIONS | STATEMENT 2 |
| DESCRIPTION | | AMOUNT |
| AUTO & TRUCK EXPENSES | | 110,840 |
| BANK CHARGES | | 52,686 |
| COMPUTER & INTERNET | | 249,443 |
| INSURANCE JANITORIAL | | 161,563 8,256 |
| LEGAL & PROFESSIONAL | | 59,134 |
| MARKETING | | 100,430 |
| MEALS NOT SUBJECT TO L | IMITATION | 25,038 |
| OFFICE EXPENSES | | 74,064 |
| OUTSIDE SERVICES | | 23,090 |
| PARKING & TOLLS PRINTING | | 8,145 |
| PROJECT EXPENSES | | 31,533 2,109,686 |
| SOFTWARE | | 92,686 |
| TELEPHONE | | 26,599 |
| PRAVEL | | 7,445 |
| UTILITIES | | 43,829 |
| WASTE/DISPOSAL | | 8,855 |
| FOTAL TO FORM 1120S, PA | AGE 1, LINE 19 | 3,991,607 |
| | | |
| SCHEDULE K | OTHER TAX-EXEMPT INCOME | STATEMENT 3 |
| DESCRIPTION | | AMOUNT |
| PPP FORGIVENESS | | 200,541. |
| OTAL TO SCHEDULE K, LI | INE 16B | 200,541. |
| | | |

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| INNVANTAGE GROUP INC. | Document 1 age 27 of | 00 | 82-205636 |
|---|----------------------------------|--------------------------|--------------------|
| SCHEDULE K | NONDEDUCTIBLE EXPENSES | ď) | STATEMENT |
| DESCRIPTION | | | AMOUNT |
| LIFE INSURANCE WAGES REDUCTION DUE TO EMP | PLOYMENT CREDITS | | 24,649 138,704 |
| TOTAL TO SCHEDULE K, LINE | 16C | | 163,353 |
| SCHEDULE K | OTHER ITEMS, LINE 1 | 7D | STATEMENT ! |
| DESCRIPTION | | | AMOUNT |
| SECTION 199A - ORDINARY IN SECTION 199A - W-2 WAGES SECTION 199A - UNADJUSTED | 162,922. 653,882. 363,172. | | |
| SCHEDULE L | OTHER CURRENT LIABILIT | IES | STATEMENT (|
| DESCRIPTION | | BEGINNING OF TAX YEAR | END OF TAX YEAR |
| LOAN - TRUCK | | 1,385. | 0 . |
| TOTAL TO SCHEDULE L, LINE | 18 | 1,385. | 0 . |
| SCHEDULE L | OTHER LIABILITIES | | STATEMENT 7 |
| DESCRIPTION | | BEGINNING OF TAX YEAR | END OF TAX YEAR |
| EIDL LOAN | | 0 . | 2,000,000. |
| TOTAL TO SCHEDULE L, LINE | 21 | 0. | 2,000,000。 |

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| INNVANTAGE GROUP INC. | 82-2056365 |
|---|-------------------------------|
| SCHEDULE L ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS | STATEMENT 8 |
| DESCRIPTION | AMOUNT |
| BALANCE AT BEGINNING OF YEAR NET INCOME PER BOOKS DISTRIBUTIONS OTHER INCREASES (DECREASES) | 404,134. 52,589. 0. |
| BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D) | 456,723. |
| SCHEDULE M-1 EXPENSES RECORDED ON BOOKS THIS YEAR NOT INCLUDED ON SCHEDULE K | STATEMENT 9 |
| DESCRIPTION | AMOUNT |
| LIFE INSURANCE EMPLOYMENT CREDITS WAGE REDUCTION CHANGE IN ACCOUNTS PAYABLE | 24,649. 138,704. 8,393. |
| TOTAL TO SCHEDULE M-1, LINE 3 | 171,726. |
| SCHEDULE M-1 INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED ON SCHEDULE K | STATEMENT 10 |
| DESCRIPTION | AMOUNT |
| PPP FORGIVENESS CHANGE IN ACCOUNTS RECEIVABLE | 200,541. 61,393. |
| TOTAL TO SCHEDULE M-1, LINE 5 | 261,934. |
| | |
| SCHEDULE M-2 ACCUMULATED ADJUSTMENTS ACCOUNT - OTHER ADDITIONS | STATEMENT 11 |
| DESCRIPTION | AMOUNT |
| EXPENSES RELATED TO TAX-EXEMPT INCOME | 200,541. |
| FOTAL TO SCHEDULE M-2, LINE 3 - COLUMN (A) | 200,541. |
| | |

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| INNVANTAGE GROUP INC. | 82-2056365 |
|--|--------------|
| SCHEDULE M-2 OTHER ADJUSTMENTS ACCOUNT - OTHER ADDITIONS | STATEMENT 12 |
| DESCRIPTION | AMOUNT |
| OTHER TAX-EXEMPT INCOME | 200,541. |
| TOTAL TO SCHEDULE M-2, LINE 3 - COLUMN (D) | 200,541. |
| SCHEDULE M-2 ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS | STATEMENT 13 |
| DESCRIPTION | AMOUNT |
| NONDEDUCTIBLE EXPENSES | 163,353. |
| TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A) | 163,353. |
| SCHEDULE M-2 OTHER ADJUSTMENTS ACCOUNT - OTHER REDUCTIONS | STATEMENT 14 |
| DESCRIPTION | AMOUNT |
| EXPENSES RELATED TO TAX-EXEMPT INCOME | 200,541. |
| TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (D) | 200,541. |

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| | | Document | Page 30 of 38 | |

| INNVANTAGE GROUP | | ago oo o. o. | | 82-2056 | 365 |
|--|----------------------------------|---------------------------------|---|---------------------------------------|-----|
| SCHEDULES M-2/L | RECONCILIATION O AND RETA | F ENDING SCHEI INED EARNINGS | DULE M-2 | STATEMENT | 15 |
| DESCRIPTION | AAA | OAA | SUTIPT | PRIOR EARNI & PROFIT & OTHER AD | S |
| SCH. M-2 BALANCES ACCRUAL TO CASH ADJ | -62,775. TUSTMENT 519,498. | 0 . | | | |
| SUBTOTALS | 456,723. | 0 . | | | |
| TOTAL RECONCILED SO | THEDULE M-2 BALANC | ES | anne, and in a millionia - distribution - distribution and the address and distribution in the address and an | 456,7 | 23. |
| ENDING RETAINED EAF | NINGS FROM SCHEDU | LE L, LINE 24 | | 456,7 | 23. |

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ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

| Asset No. | Description | Date Acquired | AMT Method | AMT Life | AMT Cost Or Basis | AMT Accumulated | Regular Depreciation | AMT Depreciation | AMT Adjustment |
|--------------|--|--------------------------------------|---------------|---------------------------------|--|--------------------------------|-------------------------|---------------------|-------------------------------|
| 8 9 | EQUIPMENT TRUCKS HVAC FIRE SYSTEM | 070117 011518 070121 070121 | 150DE SL | 7.00 35.00 39.00 15.00 | 172,861. 117,406. 7,000. 5,000. | 98,753. 68,506. 0. 0. | 13,525. | 19,560. 82. | 5,024. -6,035. 0. 0. |
| | TOTALS MACRS AMT ADJUSTMENT | | | | 302,267。 | 167,259. | 44,805。 | 45,816. -1,011. | -1,011。 |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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| Schedule K-1 | | Final K-1 Amended K- | -1 | OMB No. 1545-0123 |
|---|-----|--|---------|--|
| (Form 1120-S) Department of the Treasury | Pa | rt III Shareholder's Shar Deductions, Credits | | urrent Year Income, Other Items |
| Internal Revenue Service For calendar year 2021, or tax year beginning | 1 | Ordinary business income (loss) 81,461. | 13 | Credits |
| ending | _ 2 | Net rental real estate inc (loss) | | |
| Shareholder's Share of Income, Deductions, Credits, etc. ▶ See separate instructions. | 3 | Other net rental income (loss) | | |
| Part I Information About the Corporation | 4 | Interest income | | |
| A Corporation's employer identification number 82-2056365 | 5a | Ordinary dividends | | |
| B Corporation's name, address, city, state, and ZIP code | 5b | Qualified dividends | 14 | Schedule K-3 is attached if checked |
| INNVANTAGE GROUP INC. 1585 SOUTH SHIELDS DRIVE | 6 | Royalties | 15 A | Alternative min tax (AMT) items -506 . |
| WAUKEGAN, IL 60085 | 7 | Net short-term capital gain (loss) | | |
| C IRS Center where corporation filed return E-FILE | 8a | Net long-term capital gain (loss) | | |
| D Corporation's total number of shares Beginning of tax year 1,100.00 | 8b | Collectibles (28%) gain (loss) | | |
| Beginning of tax year 1,100.00 End of tax year 1,100.00 | 8c | Unrecaptured sec 1250 gain | | |
| Part II Information About the Shareholder | 9 | Net section 1231 gain (loss) | 16 | Items affecting shareholder basis |
| E Shareholder's identifying number **XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | 10 | Other income (loss) | | |
| F Shareholder's name, address, city, state, and ZIP code | | | | |
| JAMES STIVERS 640 CASTLEWOOD LANE DEERFIELD, IL 60015 | | | | |
| G Current year allocation percentage 50.00000% | | | 17 | Other information |
| H Shareholder's number of shares | 11 | Section 179 deduction | | |
| Beginning of tax year 550.00 End of tax year 550.00 | 12 | Other deductions | | |
| I Loans from shareholder | | | | |
| Beginning of tax year \$ \$ End of tax year \$ | | | | |
| | | | | |
| ۶ <u>-</u> | | | | |
| For IRS Use Only | | | | |
| | | | | |
| O L | 18 | More than one activity for at-ri | | 1 |
| 111071 | 19 | More than one activity for pass *See attached statement t | | |

111271 11-18-21 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120-S. 15

www.irs.gov/Form1120S

Schedule K-1 (Form 1120-S) 2021

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INNVANTAGE GROUP INC. 82-2056365 SCHEDULE K-1 FOOTNOTES SHAREHOLDER MEDICAL INSURANCE MEDICAL INSURANCE PREMIUMS NOT INCLUDED IN W-2 22,698. SHAREHOLDER MEDICAL INSURANCE PREMIUMS DEDUCTIBLE UNDER INTERNAL REVENUE CODE SECTION 162(L) 22,698.

SCHEDULE K-1 OTHER TAX-EXEMPT INCOME, BOX 16, CODE B DESCRIPTION AMOUNT SHAREHOLDER FILING INSTRUCTIONS PPP FORGIVENESS 100,271. TOTAL 100,271.

DESCRIPTION AMOUNT SHAREHOLDER FILING INSTRUCTIONS LIFE INSURANCE 12,325. WAGES REDUCED DUE TO EMPLOYMENT 69,352. SEE SHAREHOLDERS INSTRUCTIONS CREDITS TOTAL

NONDEDUCTIBLE EXPENSES, BOX 16, CODE C

SCHEDULE K-1

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INNVANTAGE GROUP INC.

82-2056365

SCHEDULE K-1

SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 17, UNDER CODE V. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 SECTION 199A ITEMS, BOX 17 CODE V DESCRIPTION AMOUNT TRADE OR BUSINESS 81,461. ORDINARY INCOME (LOSS) W-2 WAGES 326,941. UNADJUSTED BASIS 181,586. SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 17, CODE AC DESCRIPTION TRUOMA

2,476,437.

GROSS RECEIPTS - CURRENT YEAR

This list identifies the codes used on Schedule K-1 for all shareholders. For detailed reporting and filing information, see the specific line instructions, earlier, and the instructions for your income tax return.

Box 10. Other income (loss)

Code

- A Other portfolio income
- B Involuntary conversions
- C Section 1256 contracts & straddles
- Mining exploration costs D recapture
- E Section 951A(a) income inclusions
- F Inclusions of subpart F income
- G Section 951(a)(1)(B) inclusions
- H Other income (loss)

Box 12. Other deductions

- A Cash contributions (60%)
- Cash contributions (30%)
- Noncash contributions (50%)
- Noncash contributions (30%)
- Capital gain property to a 50% limit organization (30%)
- Capital gain property (20%)
- Contributions (100%)
- Investment interest expense

- Deductions royalty income
- Section 59(e)(2) expenditures
- Reserved for future use
- Deductions portfolio (other)
- Preproductive period expenses
- Reserved for future use
- Reforestation expense deduction
- Reserved for future use
- Q Reserved for future use
- R Reserved for future use
- S Other deductions

Box 13, Credits

- Reserved for future use
- В Reserved for future use
- \mathbb{C} Low-income housing credit (section 42(j)(5)) from post-2007 buildings
- D Low-income housing credit (other) from post-2007 buildings
- Qualified rehabilitation expenditures (rental real estate)
- Other rental real estate credits
- Other rental credits
- Undistributed capital gains credit
- Biofuel producer credit
- Work opportunity credit
- Disabled access credit
- Empowerment zone employment credit
- M Credit for increasing research activities
- Credit for employer social security and Medicare taxes
- O Backup withholding

P Other credits

Box 15. Alternative minimum tax (AMT) items

- A Post-1986 depreciation adjustment
- В Adjusted gain or loss
- Depletion (other than oil & gas)
- D Oil, gas, & geothermal-gross income
- Oil, gas, & geothermal-deductions
- Other AMT items

Box 16. Items affecting shareholder basis

- Tax-exempt interest income
- В Other tax-exempt income
- C Nondeductible expenses
- D Distributions
- Ε Repayment of loans from shareholders
- Foreign taxes paid or accrued

Box 17. Other information

- Α Investment income
- В Investment expenses
- С Qualified rehabilitation expenditures (other than rental real estate)
- Basis of energy property
- Ε Recapture of low-income housing credit (section 42(j)(5))
- Recapture of low-income housing credit (other)

- G Recapture of investment credit
- Recapture of other credits
- Look-back interest-completed long-term contracts
- Look-back interest-income forecast method
- Dispositions of property with section 179 deductions
- Recapture of section 179 deduction
- Section 453(I)(3) information
- Section 453A(c) N information
- Section 1260(b) 0 information
- Interest allocable to production expenditures
- CCF nonqualified withdrawals
- R Depletion information-oil and gas
- Reserved for future use
- T Reserved for future use
- Net investment income
- V Section 199A information
- Reserved for future use
- Х Reserved for future use
- Υ Reserved for future use
- Reserved for future use
- Excess taxable income AB Excess business interest income

AA

- AC Gross receipts for section 448(c)
- AD Other information

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| Schedule K-1 | | Final K-1 Amended K | -1 | OMB No. 1545-0123 |
|---|-----|---|---------|---------------------------------------|
| (Form 1120-S) Department of the Treasury | Pa | rt III Shareholder's Shar Deductions, Credits | | urrent Year Income, Other Items |
| Internal Revenue Service For calendar year 2021, or tax year beginning | 1 | Ordinary business income (loss) 81,461. | 13 | Credits |
| ending | _ 2 | Net rental real estate inc (loss) | | |
| Shareholder's Share of Income, Deductions, Credits, etc. ▶ See separate instructions. | 3 | Other net rental income (loss) | | |
| Part I Information About the Corporation | 4 | Interest income | | |
| A Corporation's employer identification number 82-2056365 | 5a | Ordinary dividends | | |
| B Corporation's name, address, city, state, and ZIP code | 5b | Qualified dividends | 14 | Schedule K-3 is attached if checked |
| INNVANTAGE GROUP INC. 1585 SOUTH SHIELDS DRIVE | 6 | Royalties | 15 A | Alternative min tax (AMT) items -505. |
| WAUKEGAN, IL 60085 | 7 | Net short-term capital gain (loss) | | |
| C IRS Center where corporation filed return E-FILE | 8a | Net long-term capital gain (loss) | | |
| D Corporation's total number of shares Beginning of tax year 1,100.00 | 8b | Collectibles (28%) gain (loss) | | |
| Beginning of tax year 1,100.00 End of tax year 1,100.00 | 8c | Unrecaptured sec 1250 gain | | |
| Part II Information About the Shareholder | 9 | Net section 1231 gain (loss) | 16 | Items affecting shareholder basis |
| E Shareholder's identifying number | 10 | Other income (loss) | | |
| F Shareholder's name, address, city, state, and ZIP code | | | | |
| DEAN THEO 611 VOLTZ ROAD NORTHBROOK, IL 60062 | | | | |
| G Current year allocation percentage 50.00000% | | | 17 V | Other information |
| H Shareholder's number of shares | 11 | Section 179 deduction | AC | |
| Beginning of tax year 550.00 End of tax year 550.00 | 12 | Other deductions | | |
| I Loans from shareholder Beginning of tax year \$ End of tax year \$ | | | · | |
| For IRS Use Only | 18 | More than one activity for at-r | | |
| | 19 | More than one activity for pas *See attached statement | | |

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INNVANTAGE GROUP INC.

82-2056365

| SCHEDULE K-1 | | FOOTNOTES | | | | | |
|--|-------------|----------------|---------------------|--------------|--|--|--|
| SHAREHO | LDER MEDICA | L INSURANCE | | | | | |
| MEDICAL INSURANCE PREM | 26,970. | | | | | | |
| SHAREHOLDER MEDICAL INSURANCE PREMIUMS DEDUCTIBLE UNDER INTERNAL REVENUE CODE SECTION 162(L) 26, | | | | | | | |
| SCHEDULE K-1 O | THER TAX-EX | EMPT INCOME, | BOX 16, CODE B | | | | |
| DESCRIPTION | | AMOUNT | SHAREHOLDER FILING | INSTRUCTIONS | | | |
| PPP FORGIVENESS | | 100,270. | | | | | |
| TOTAL | | 100,270. | | | | | |
| | • | | | | | | |
| SCHEDULE K-1 | ONDEDUCTIBL | E EXPENSES, BO | OX 16, CODE C | | | | |
| DESCRIPTION | | AMOUNT | SHAREHOLDER FILING | INSTRUCTIONS | | | |
| LIFE INSURANCE WAGES REDUCED DUE TO EN | | 12,324. | | | | | |
| CREDITS | METO IMEMI. | 69,352. | SEE SHAREHOLDERS IN | ISTRUCTIONS | | | |
| TOTAL | _ | 81,676. | | | | | |

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INNVANTAGE GROUP INC.

82-2056365

SCHEDULE K-1

SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF THE OUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 17, UNDER CODE V. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 SECTION 199A ITEMS, BOX 17 CODE V DESCRIPTION AMOUNT TRADE OR BUSINESS 81,461. ORDINARY INCOME (LOSS) W-2 WAGES 326,941. UNADJUSTED BASIS 181,586. SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 17, CODE AC DESCRIPTION AMOUNT

2,476,437.

GROSS RECEIPTS - CURRENT YEAR